

**Instructions:**  
**Foreign Not-For-Profit  
Corporation Application****Contact:**  
**Kansas Office of the Secretary of State**Memorial Hall, 1st Floor  
120 S.W. 10th Avenue  
Topeka, KS 66612-1594(785) 296-4564  
kssos@sos.ks.gov  
www.sos.ks.gov

All information on the foreign application must be complete and accompanied by the correct filing fee or the document will not be accepted for filing.

- ☐ 1. **FILING FEE:** The filing fee for this document is **\$115**.
- ☐ 2. **PAYMENT:** Please enclose a check or money order payable to the Secretary of State. Applications received without the appropriate fee will not be accepted for filing. Please do not send cash. **Also, to expedite processing, please do not use staples on your documents or to attach checks.**
- ☐ 3. **INCLUDE AN ORIGINAL CERTIFICATE OF GOOD STANDING OR EXISTENCE:** The certificate must be issued by the state, country or other jurisdiction where incorporated attesting to the fact that such foreign corporation is in good standing in such jurisdiction. The certificate must be issued within 90 days of filing the application.
- ☐ 4. **CORPORATION NAME:** The corporate name on all documents must be exactly the same as it appears on the certificate, including punctuation. If the corporation applying for authority has the same name as an entity already on file, you may do **one** of the following:
  - ✓ Include a letter of consent from the existing entity to use the name. If the existing entity is a corporation, the consent must be signed by an authorized officer. A consent from another type of entity must be signed by any authorized person.
  - ✓ Include a letter stating that the corporation will list its home state as a means of identification and in its advertising in the state of Kansas.

The use of a corporate name is governed by K.S.A. 17-7301 (c)(2) and (3). You may view statutes at [www.kslegislature.org](http://www.kslegislature.org).

- ☐ 5. **RESIDENT AGENT:** The resident agent is a person or entity that is authorized to accept service of process (lawsuits) on behalf of the business entity. This does not necessarily mean that the agent himself/herself is being sued, but that he/she has the authority and responsibility to accept service of process on behalf of the business.
- ☐ 6. **REGISTERED OFFICE:** The registered office is the address where the resident agent is located.
- ☐ 7. **MAILING ADDRESS:** The mailing address is where you would like to receive official mail from the Secretary of State's office.
- ☐ 8. **SIGNATURE:** The application requires the signature of an authorized officer.

**NOTICE:** *If the entity has been doing business in Kansas at least six months prior to filing with our office, you may owe annual reports and/or penalty fee (K.S.A. 17-7002).*

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**STAY UP-TO-DATE ON YOUR ORGANIZATION'S STATUS, ANNUAL REPORT DUE DATE AND CONTACT ADDRESSES BY GOING TO [WWW.SOS.KS.GOV](http://WWW.SOS.KS.GOV). UNDER QUICK LINKS, SELECT SEARCH BUSINESS ENTITY INFORMATION.**

**NOTICE:** *There is a \$25 service fee for all checks returned by your financial institution. All information must be completed or this document will not be accepted for filing.*

**FN****51-17**

KANSAS SECRETARY OF STATE

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www.sos.ks.gov*Above space is for office use only.***INSTRUCTIONS:** *All information must be completed or this document will not be accepted for filing.  
Please read instructions sheet before completing.*

<b>1. Name of the corporation:</b> <i>Name of corporation must match the name on record with the home state</i>	
<b>2. State/Country of organization:</b>	
<b>3. Began doing business in Kansas:</b>	<input type="checkbox"/> Upon qualification  <input type="checkbox"/> _____ Month Day Year
<b>4. Name of the resident agent and address of the registered office in Kansas:</b> <i>Address must be a street address A P.O. box is unacceptable</i>	Name _____ Street Address _____ City _____ Kansas _____ State Zip
<b>5. Principal office address:</b>	Street Address _____ City _____ State _____ Zip _____ Country _____
<b>6. Mailing address:</b> <i>This address will be used to send official mail from the Secretary of State's office</i>	Attention Name _____ Address _____ City _____ State _____ Zip _____
<b>7. Tax closing month:</b>	
<b>8. Full nature and character of the business to be conducted in the state of Kansas:</b>	

9. The corporation hereby consents, without power of revocation, that actions may be commenced against it in the proper court of any county in the state of Kansas where there is a proper venue by service of process on the Secretary of State of the state of Kansas; and the corporation stipulates and agrees that such service shall be taken and held in all courts to be valid and binding as if due service had been made upon an officer of the corporation.

10. This corporation is operating as a foreign not-for-profit corporation.

11. Duration of the corporation:

☐ Perpetual

☐ Date the corporation will cease \_\_\_\_\_  
Month Day Year

12. Effective date:

*A future effective date must be within 90 days of filing date*

☐ Upon filing

☐ Future effective date \_\_\_\_\_  
Month Day Year

13. I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct and that the corporation is in good standing in its home state, and I have remitted the required fee.

\_\_\_\_\_  
*Signature of authorized officer*

\_\_\_\_\_  
*Date (month, day, year)*